## MARRIAGE LICENSE APPLICATION

	1A. PARTY A - FIRST		1B. MIDDLE			
I	1C. CURRENT LAST		1D. LAST NAME AT BIRTH (IF DIFFERENT THAN 1C)			
PARTY A						
PERSONAL INFORMATION	2. DATE OF BIRTH (MM/DD/CCYY)	3. STATE/COUNTRY OF BIRTH	4. # PREV. MARRIAGES	5A. LAST MARRIAGE ENDED BY:  DEATH  DISSOLUTION  ANNULMENT	5B. DATED ENDED (MM/DD/CCYY)	
	6. ADDRESS	7. CITY	8. STATE/COUNTRY	9. ZIP	<b>'</b>	
	10A. FULL BIRTH NAME OF FATHER/PARENT		10B. STATE OF BIRTH (IF OUSIDE U.S. ENTER COUNTRY)			
	11B. FULL BIRTH NAME OF MOTHER/PARENT		11B. STATE OF BIRTH (IF OUTSIDE U.S. ENTER COUNTRY)			
	12A. PARTY B - FIRST		12B. MIDDLE			
	12C. CURRENT LAST		12D. LAST NAME AT BIRTH (IF DIFFERENT THAN 12C)			
PARTY B	13. DATE OF BIRTH (MM/DD/CCYY)	14. STATE/COUNTRY OF BIRTH	15. # PREV. MARRIAGES	16. LAST MARRIAGE ENDED BY:	16B. DATED ENDED	
PERSONAL INFORMATION				☐ DEATH☐ DISSOLUTION☐ ANNULMENT	(MM/DD/CCYY)	
	17. ADDRESS	18. CITY	19. STATE/COUNTRY	20. ZIP		
	21A. FULL BIRTH NAME OF FATHER/PARENT		21B. STATE OF BIRTH (IF OUTSIDE U.S. ENTER COUNTRY)			
	22A. FULL BIRTH NAME OF MOTHER/PARENT		22B. STATE OF BIRTH (IF OUTSIDE U.S. ENTER COUNTRY)			
	Contact Phone Number:					
	PLEASE ALLOW 24 HOURS FOR PROCESSING					
	DUE UPON PICKUP - PHOTO ID, \$49 FEE (CASH OR CHECK ONLY)					
	AND SIGNATURES ON THE OFFICIAL TYPED FORM					
	Office Use Only					

Office Use Only	
Application Date:	
Expiration Date:	
License Number:	